

**merlin**  
Medical Emergency Relief International

Britain's emergency medical aid agency

## Annual Review 1997-98

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## An appeal for support

If you would like to support our work overseas, through donations, fundraising events or a corporate relationship, please turn to page 16 for details.

## Talking about MERLIN



"I have seen MERLIN's field teams providing primary healthcare in war-torn Afghanistan and I was profoundly impressed by their energy and professionalism. In the past five years, MERLIN has grown into a highly effective agency which can reach the world's most difficult places, and I am delighted that it is a partner of ECHO in this life-saving work."

Emma Bonino, European Commissioner for Humanitarian Affairs

MERLIN's mission is to provide professional medical care in emergencies worldwide.

In some of the harshest places on earth, for some of the world's most vulnerable people, we get the aid where it's needed, when it's needed – no matter what.

We are small, fast and hard-hitting. Increasingly, we are respected as Britain's specialists in this field.

This year MERLIN is five years old. We have come of age. This document is our manifesto for the future.

# A manifesto for the future

## by Alastair Troup



ALASTAIR TROUP, CHIEF EXECUTIVE

MERLIN is now five years old and already it has grown into an internationally recognised medical aid agency, with high standards and the ability to achieve results in the harshest environments. We are now a prime channel for the British medical community to share its world-class skills with the world's most vulnerable people.

At this five year point, we have demonstrated our capacity to respond to major disasters, we have used our specialist expertise to bring medical issues to the fore, and we have developed our infrastructure to conduct operations in a professional and responsible manner. Having concentrated so far on the establishment of best medical practice in the field, our next challenge is to develop our financial base in order to guarantee our operational independence.


For many people, this has been a turbulent year, but should any of us think this applies to our own circumstances, our experiences pale into insignificance when compared to those of Dr Rasheedi in Afghanistan, Beslam in Chechnya, Sheh Conteh in Liberia or Godlief in Irian Jaya. I particularly single out here not locations but people, and not any people but members of MERLIN, our local staff who are the backbone of our work in the field. They, for me, signify one of the three main pillars of our projects: the maximum use and empowerment of local staff, the support and development of local health structures, and the commitment of our field workers.

In fact, for us it's been a stimulating year. In addition to our continuing work in conflict zones, MERLIN has responded to several massive natural disasters; no amount of poverty eradication would have prevented these tragedies. We have been at the forefront of the international response to both

Afghanistan earthquakes, and we have responded to the desperate needs of people affected by El Nino in the scrublands of Wajir, northern Kenya, and in the remote and inaccessible highlands of Irian Jaya, Indonesia. These projects demonstrate a very clear need for emergency medical relief.

Medical values are still at our heart. Malaria is one of the world's biggest killers, killing over 1 million people and affecting about half a billion others each year: we are confronting it in eight of our fourteen projects. Tuberculosis, a global public health problem, is killing more people worldwide than any other infectious disease: we continue with our pioneering work in Siberia, to encourage the adoption of internationally proven tuberculosis programmes throughout the whole of Russia. In the tropical forests of the Democratic Republic of Congo (formerly Zaire), we are committed to establishing, in three years time, an effective primary healthcare system. In southern Sudan, we are introducing simple and effective vector controls in response to sleeping sickness: the project has attracted international interest and is likely to lead to collaborative ventures elsewhere with other international agencies. In Sierra Leone and Liberia, we have developed programmes addressing Lassa Fever in close collaboration with the Pasteur Institute.

Such work takes extraordinary commitment and, sadly, it seems increasingly difficult to prise doctors and nurses away from their UK careers to spare six months or so to help the desperately needy. For those who do go overseas, the rewards are tremendous, and with the introduction of our training courses we can have people on the ground making a significant impact very quickly. We are still firmly committed to providing opportunities for 'first timers', and our conversion training courses can enhance their existing skills to contribute to the increasingly demanding aid sector.



"MERLIN is a prime channel for the British medical community to share its world-class skills with the world's most vulnerable people."

## A manifesto for the future

The humanitarian world is changing and we must keep ahead. We work in a complex environment where the differentiation between nations, their citizens, multinationals and 'armies' is increasingly blurred, but where individual suffering continues unabated. For MERLIN to survive, and to help others survive, we must be able to work independently from the vested interests that prevail upon the weak. We must also recognise the importance of committed individuals who will implement our programmes. If we expect them to work in this confused arena we must prepare and equip them accordingly; there can be no compromise here. To achieve all this, independent funding is essential.

If people and their passion are our soul, then independent funding is our life-blood. In the past we have been able to more or less rely on a spectrum of institutional donors, but this is changing – fast. No longer are DfID, ECHO, the US Government (OFDA) or any of the other big institutions prepared to be sole benefactors. They expect organisations like MERLIN to find co-funding for our activities, and this is exemplified by the institutions' reluctance to fund the support elements of a programme (such as communications, good management and medical evaluations). Obviously, an organisation like MERLIN, which operates internationally, must have a sound infrastructure: comprehensive logistics, excellent people management, an operating reserve and, above all, flexibility. These can only be provided by the creation of a robust independent financial base, and this is now a very high priority for us. Without it we will not survive and, while the need for our work will remain, we will not.

So what's new this year? We can identify a number of trends which indicate future areas of growth. Collaboration with other agencies is a major development. We have joint projects with both CARE (UK) and OXFAM, and we are in negotiations with others. We have just obtained membership of Operation Lifeline Sudan, the aid agencies' joint forum; as I write, we are beginning a famine relief programme in Sudan that may develop into the biggest programme we have ever undertaken.

Globalisation is a continuing trend: with the start of our first project in South East Asia, we anticipate expanding the spread of our operations wherever we think the needs match our expertise. Having already established a regional base in

Peshawar, Pakistan, we are now doing the same in Nairobi; we hope to repeat this model elsewhere as required.

Another pointer for the future is the way in which we are beginning to add value to the aid sector as a whole. An example of this is our new range of training courses in emergency relief, which are open to aid workers from any agency, and which are part of the increasing professionalisation of this sector. On a more academic level, we are in process of setting up a university lectureship in emergency medicine, which would provide a national focus for best practice in this highly specialised area. More pragmatically, we have been a prime mover in the creation of a quarterly forum for medical relief agencies and experts to share their knowledge and experience, and have helped to create an electronic website for logisticians to pool information and contacts at high speed during emergencies. In these and other ways, we are keen to develop standards of best practice.

To support these operations we have had to expand our infrastructure, and for us that primarily means our headquarters staff in London. Decentralisation to the field is an aspiration, but cannot be implemented too rapidly. In London, we are about 40 strong, and we will remain at that figure for the time being. This figure compares with a snapshot of about 60 expatriates and 550 other salaried staff in the field, and a target population of approximately 2,212,000 people whom we are helping worldwide.

Finally, all of us who have been part of a MERLIN field project will have been reinvigorated in our determination to sustain our high quality medical relief for those who so desperately need it. This is all about reaching people, villages and communities who, with a little bit of assistance, can do so much for themselves.

There are no stereotypes here. What the MERLIN teams are doing is giving people – individuals – hope and opportunity. And we will continue to do so.

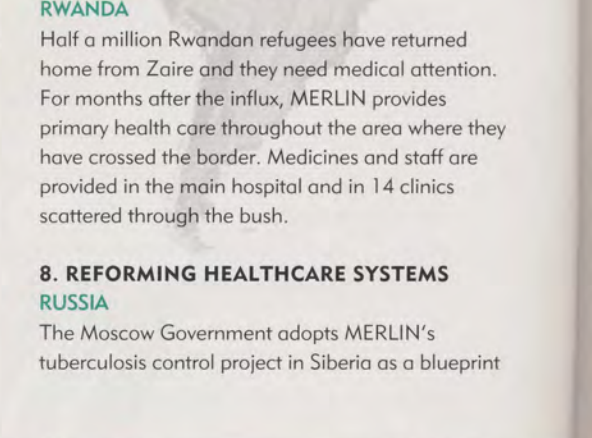
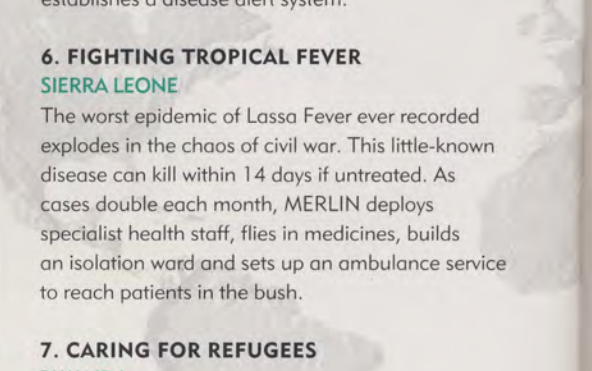
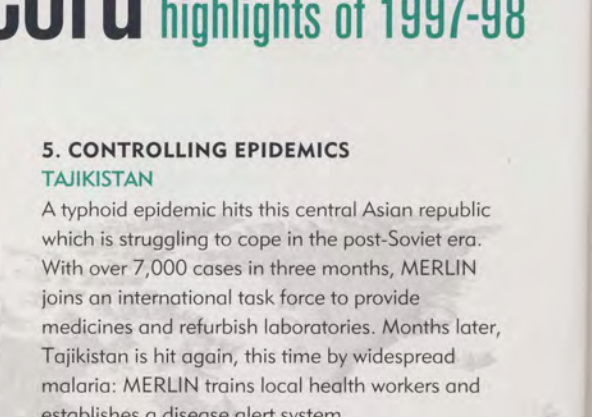
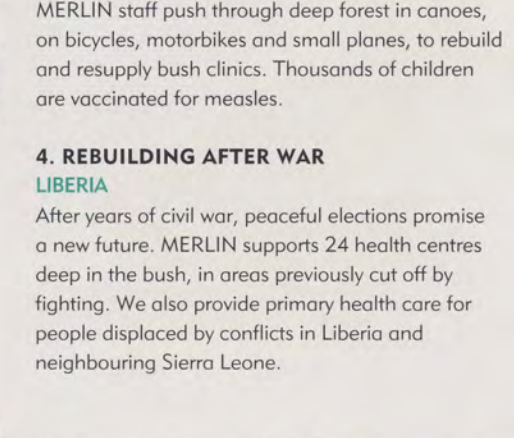
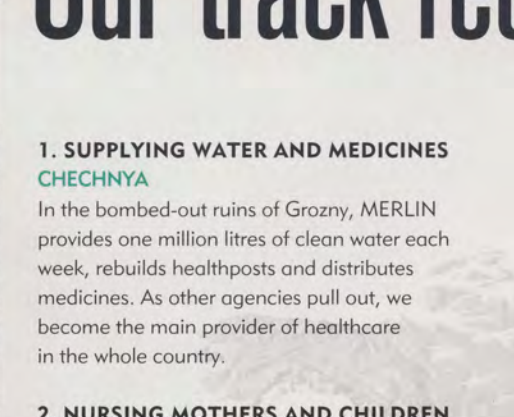
*Alastair Timp*

"If people and their passion  
are our soul, then independent  
funding is our life-blood."





# Our track record highlights of 1997-98



## 1. SUPPLYING WATER AND MEDICINES CHECHNYA

In the bombed-out ruins of Grozny, MERLIN provides one million litres of clean water each week, rebuilds healthposts and distributes medicines. As other agencies pull out, we become the main provider of healthcare in the whole country.

## 2. NURSING MOTHERS AND CHILDREN AFGHANISTAN

Healthcare for women has been restricted by years of civil war and recent codes of Islamic fundamentalism. MERLIN takes mobile clinics to remote villages, promoting mother-and-child health and training over 100 village midwives.

## 3. REACHING THROUGH RAINFOREST DEMOCRATIC REPUBLIC OF CONGO

Hundreds of thousands of civilians are scattered as a result of civil war and massive refugee movements. Many are wounded, starving and sick. MERLIN staff push through deep forest in canoes, on bicycles, motorbikes and small planes, to rebuild and resupply bush clinics. Thousands of children are vaccinated for measles.

## 4. REBUILDING AFTER WAR LIBERIA

After years of civil war, peaceful elections promise a new future. MERLIN supports 24 health centres deep in the bush, in areas previously cut off by fighting. We also provide primary health care for people displaced by conflicts in Liberia and neighbouring Sierra Leone.

## 5. CONTROLLING EPIDEMICS TAJIKISTAN

A typhoid epidemic hits this central Asian republic which is struggling to cope in the post-Soviet era. With over 7,000 cases in three months, MERLIN joins an international task force to provide medicines and refurbish laboratories. Months later, Tajikistan is hit again, this time by widespread malaria: MERLIN trains local health workers and establishes a disease alert system.

## 6. FIGHTING TROPICAL FEVER SIERRA LEONE

The worst epidemic of Lassa Fever ever recorded explodes in the chaos of civil war. This little-known disease can kill within 14 days if untreated. As cases double each month, MERLIN deploys specialist health staff, flies in medicines, builds an isolation ward and sets up an ambulance service to reach patients in the bush.

## 7. CARING FOR REFUGEES RWANDA

Half a million Rwandan refugees have returned home from Zaire and they need medical attention. For months after the influx, MERLIN provides primary health care throughout the area where they have crossed the border. Medicines and staff are provided in the main hospital and in 14 clinics scattered through the bush.

## 8. REFORMING HEALTHCARE SYSTEMS RUSSIA

The Moscow Government adopts MERLIN's tuberculosis control project in Siberia as a blueprint



for reforming TB services throughout Russia. To spread understanding of the issues, we host an international TB conference in London, and persuade the BBC to film a documentary on this global threat.

## 9. VACCINATING CHILDREN CONGO BRAZZAVILLE

In the aftermath of a military coup, civilians return to the war-torn city of Brazzaville. MERLIN launches a mass-vaccination campaign to inoculate 200,000 children against measles. The BBC film this for a documentary which portrays the challenges and rewards of being an aid worker.

## 10. PREPARING FOR DISASTER MONTSERRAT

With the volcano threatening to erupt, the British Government asks MERLIN to help prepare for the worst. Experts in handling mass casualty disasters are flown out to prepare contingency plans in case of an eruption or evacuation.

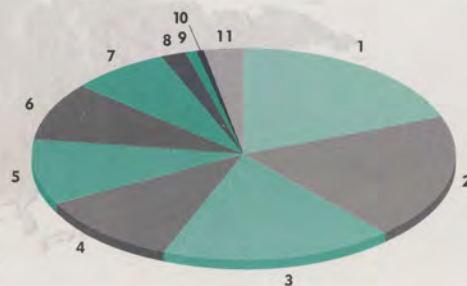
## 11. PILOTING APPROPRIATE TECHNOLOGY SUDAN

As Sleeping Sickness sweeps through war-torn Sudan, MERLIN joins an international team making the first ever attempt to control its spread in an active war zone. This is based on a grassroots network of strategically placed flytraps, which can be made and monitored by villagers for themselves.

*The activities described here represent only part of MERLIN's wide-ranging medical work in each country.*

## Who we helped

In 1997 we spent over £5m on providing medical relief for the victims of disasters around the world



1. Chechnya £978,000
2. Afghanistan £976,000
3. DR Congo £910,000
4. Liberia £571,000
5. Tajikistan £507,000
6. Sierra Leone £454,000
7. Rwanda £380,000
8. Russia £101,000
9. Congo Brazzaville £19,000
10. Montserrat £6,000
11. Assessments £131,000

## MONITORING TROUBLESPOTS

Emergency assessment missions were sent in 1997 to: Albania, Angola, Burundi, Congo Brazzaville, Democratic Republic of Congo, Eritrea, Haiti, Iran, Moldova, Israel/Palestine, Liberia, Myanmar, Sri Lanka, Sudan, Uganda.



# The people behind the projects



**1.** "When I was shot, people from my town put me in a hammock and carried me through the bush away from the fighting. All the time my back was bleeding. After ten days we reached MERLIN's health post. Now my back is getting better and I can walk well."

**Agnes, refugee from Sierra Leone**

**2.** "I wanted to support MERLIN in its great work overseas – so I ran the Marathon des Sables. A bit extreme perhaps, to run 150 miles through the desert, but I raised over £10,000 for the pleasure."

**Hugh Crossley, London**



**3.** "Last winter, it took me 36 hours to drive home from visiting a MERLIN project in a nearby province. We drove past pistachio forests, and had to shovel snow and mud as we went. More than once it took two hours to drive 10 metres. Looking back now, it was just another journey to work."

**Jawad Hasan Zadeh, translator, Afghanistan**



**4.** "With MERLIN's help we can kill the tsetse flies which make people in my village sick. Now we have our fly traps, not so many people are suffering. Since I am the village head man, I am a trap monitor."

**Edward Sianyakindi, Degere village, Sudan**



"The phone never stops ringing. It could be a volunteer from Tajikistan, a donor from America or a journalist from London. There's no such thing as a normal day at MERLIN."

Zainab Orekan, receptionist, MERLIN London



5. "We ask an enormous amount from field staff, but our training courses can put them on the right track. Teambuilding is vital and – with enthusiasm and commitment – our volunteers learn to deal with whatever their new job flings at them."

Lucy Markby, human resources officer, London

6. "A week ago I was cruising Chelsea in a soft-top car. Now here I am, bumping down the Trans-Congo Highway in the back of a jeep with eight other people, 750kg of dried milk and five live chickens."

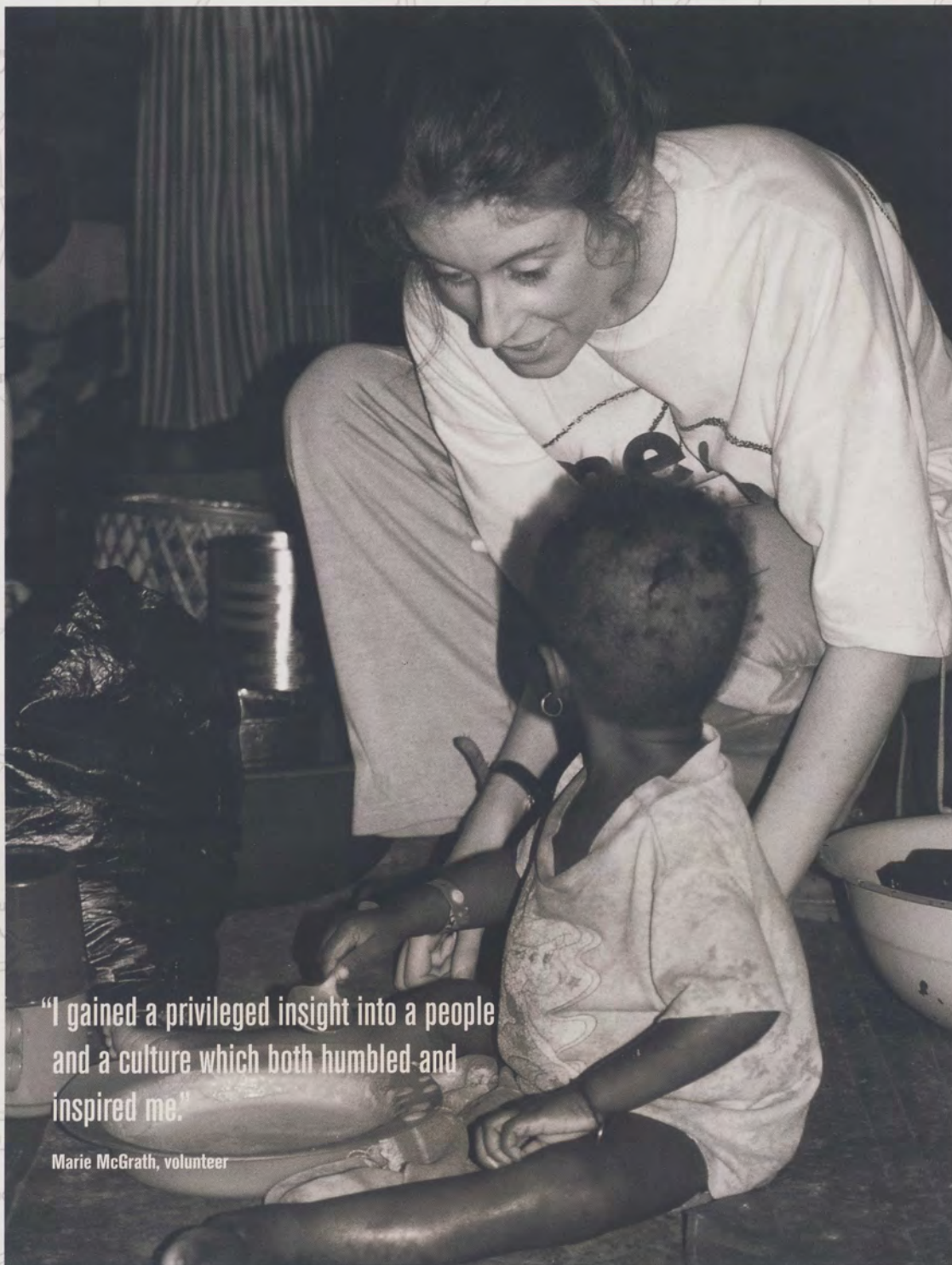
Jonathan Campbell, volunteer, Democratic Republic of Congo

7. "We're working with MERLIN to control disease in northern Kenya. Oxfam's work on reducing water-borne disease after the floods was complemented by MERLIN's work with medical services. Partnership is the way forward for aid agencies – the more resources, the more ideas, the better."

Nick Roseveare, Oxfam

8. "It's a great experience to socialise with colleagues from a completely different culture. On our logistician's birthday, we all sat down to a birthday banquet of rice, goat and raw onions. We gave him an Afghan hat and a turban and the local staff made an enormous cake."

Dr Karine Zander, volunteer, Afghanistan



"I gained a privileged insight into a people and a culture which both humbled and inspired me."

Marie McGrath, volunteer

# A letter from the field

by Marie McGrath

Hot, humid, hard work – the ultimate challenge – experience of a lifetime – these are an understatement of my time as a nutritionist for MERLIN. An unexpected phone call, a rapid interview and some hastily acquired jabs transferred me from a high-tech, high-spec intensive care unit in Newcastle, to a feeding centre for severely malnourished children in a converted warehouse in the African bush. It proved an adventure and a half.

The airport at Kenema, in Sierra Leone, consisted of a dirt track runway, a customs post in a grass hut, and lots of kids selling bottled Fanta. I was welcomed into the MERLIN household. Here lived the expatriate staff: two doctors, a logistician, an administrator and now me – supported by local staff. Our feeding centre was a short walk away, and every morning I was met by masses of kids laughing and screaming “puom a weeh”, which means “white skin”. I had been told about the beautiful African surroundings, the wonderful MERLIN programme and just how good it was to work there. It was all an understatement.

But why was there a nutritional problem in this fertile country? War. Sierra Leone has suffered from civil war since 1991. Up to half the entire population have fled from their homes, farming is disrupted and most roads are closed. So food hasn't been grown or distributed.

To run an effective therapeutic feeding programme in Kenema, we needed accurate information on the nutritional status of the local people. Quality control is important in all MERLIN's programmes, and with good data it is also achievable. My task was to make a nutritional survey of the area.

I involved everyone in the survey, from MERLIN expats to local taxi drivers. Local chiefs gave it their permission. MERLIN cooks served up lunchtime grub of cassava and rice for hungry surveyors. Nine teams of four people surveyed over 800 children in 534 households over two and a half days. This was achieved despite the onset of rains on day two, which turned the streets into mudbaths.

Our findings indicated the areas of greatest need, mostly in the villages outside the town. These results were used to refocus our own programme, and were passed on to other aid agencies in the area and Sierra Leone's Department of Health.

Besides the survey, I spent a lot of time helping local health staff. I held training sessions in the intensive care unit on how to feed severely malnourished children, and in the outlying villages on how to monitor children's nutritional status and growth. I checked medical procedures in the feeding centre, and supervised the implementation of correct nutrition protocols.

All too soon it was time to go home and I left Sierra Leone, heartbroken. I was exhausted, but the most fulfilled I had ever been in my life. Aside from the valuable experience of conducting a nutrition survey and working in a feeding programme, I learned much more besides. I experienced at first hand real teamwork amongst the MERLIN expats, the best gang of people I have met and worked with anywhere. And I gained a privileged insight into an African people and culture which both humbled and inspired me. Despite the harshest of circumstances and the severest of conditions, these people soldiered on with amazing resilience and energy, happy to break into singing and dancing at a moment's notice. It is said that dancing is the expression of extreme joy and extreme pain and these people personified this.

Not a day goes by when I do not think of the MERLIN team in Sierra Leone and wonder what they are up to. Would I go back? I did, for another nutritional survey. For a third time? When's the next flight!

Marie McGrath

# MERLIN's financial management

MERLIN carefully manages its finances to ensure value for money for donors.

## We use your money where it is needed most...

- We spend our money on operations not administration: 90% of our funds are spent on providing emergency medical programmes around the world.
- Our organisation is small, flexible and responsive: we employ only 40 people in the UK to manage more than 600 staff worldwide.

## We use your money to achieve maximum results...

- Rigorous assessments ensure that our programmes are clearly targeted at identified medical needs.
- Our careful selection and training of field staff ensures that they have the professional expertise to achieve effective results.
- We co-ordinate with other aid agencies to optimise resources and avoid duplication.
- Our programmes are constantly evaluated and adapted to maintain the most effective response in changing situations.

## We use your money to create long-term benefits...

- MERLIN programmes balance urgency with sustainability. At every stage, we work in partnership with local health services to train staff, rebuild facilities and establish healthcare systems which can continue into the long term.
- Once an emergency has stabilised and MERLIN's task is completed, we carefully hand over to other agencies who can undertake the long-term development of public healthcare.
- The impact of your donation lasts long after the money has been spent.

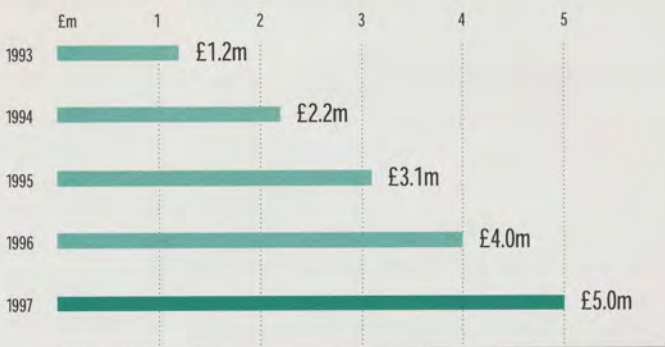
To find out how to make the best use of donations and sponsorship, please see page 16.

HOW £1 IS SPENT



90 pence out of every £1 donated to MERLIN is spent on providing emergency medical relief overseas.

DIRECT CHARITABLE EXPENDITURE 1993-97



# Financial summary for 1997

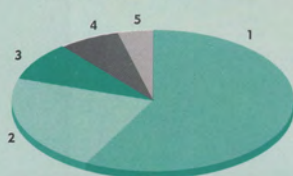
## TOTAL INCOME

£'000	1997	1996
Donations and gifts	518	240
Field operations	5,043	3,931
Fundraising events	103	9
Interest receivable	3	21
	<b>5,667</b>	<b>4,201</b>

## TOTAL EXPENDITURE

£'000	1997	1996
Direct charitable expenditure	5,033	4,046
Fundraising and publicity	203	133
Management and administration	349	310
	<b>5,585</b>	<b>4,489</b>

### SOURCES OF FUNDS EXPENDED IN 1997



1. European Community 58%
2. British Government 22%
3. Private 9%
4. US Government 7%
5. United Nations 4%

### EXPENDITURE IN 1997



1. Direct charitable expenditure 90%
2. Management and administration 6%
3. Fundraising and publicity 4%

The above information is extracted from the full annual accounts for 1997, copies of which are available from the Company Secretary, MERLIN, 14 David Mews, Porter Street, London W1M 1HW.

The annual accounts were audited by Littlejohn Frazer, chartered accountants and registered auditors, whose report was unqualified. The annual accounts are filed with the Charity Commission each year.

MERLIN (Medical Emergency Relief International) is a registered charity no. 1016607. Merlin Board Limited is a company limited by guarantee. Company no. 2823935. Registered company address: 95 Aldwych, London WC2B 4JF.

Accounts for 1998 will be available in mid-1999.

## Directors

Peter Elwes (Chairman), Baroness Cox of Queensbury, Dr Penelope Key, Nicholas Mellor, Dr John Porter, Mark Sater, Mrs Barbara Stapleton, Charles Stewart-Smith

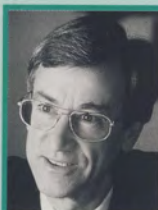
## Patrons

Sir Donald Acheson, Professor June Clark, Christopher Deuters, Mrs Jessica Douglas-Home, Mrs Mary Fagan, Martin Griffiths, Lord McColl of Dulwich, Eric Newby, Sir Peter Ramsbotham, Lord Richardson of Lee, Professor Sir Leslie Turnberg

# An appeal for assistance

The demand for emergency relief has increased steadily in the five years since MERLIN was founded. Each year, we have spent an extra £1m on relief programmes. It is clear that our life-saving expertise is desperately needed.

As an emergency agency, we need to maintain the resources to move quickly and effectively. Currently we receive support from governments and institutions around the world. But this is not enough. Increasingly we require independent funds of our own.



"I am proud to say that Glaxo Wellcome has been a committed supporter of MERLIN since it was first established in 1993. In this short space of time, MERLIN has established itself as a leading international charity, with a rigorous commitment to medical excellence and professionalism.

As a corporate supporter, we have found that MERLIN uses our money well. Our donations of £128,000 have released £2.8m of funding from other sources for relief programmes. And the impact of these programmes is global.

As one of the world's largest pharmaceutical companies, we are pleased to associate ourselves with MERLIN, one of the world's boldest charities."

Sir Richard Sykes, Chairman, Glaxo Wellcome plc

## £50,000

- sends 1 emergency airlift to a disaster zone.
- funds the critical first phase of a crisis operation, allowing us to launch within hours of a disaster – and without waiting for institutional donors.

## £10,000

- funds 1 disaster assessment mission, the essential first stage in launching a crisis response.
- equips 1 cholera isolation camp with enough medicines and water purification equipment to treat 625 patients and control an epidemic.

## £1,000

- buys 1 emergency health kit containing enough drugs and equipment to treat 300 wounded civilians in a war zone.
- trains and prepares 1 new aid worker to achieve high quality fieldwork.

## The next step

**We hope that this report has demonstrated our credentials as a leading agency in relief aid worldwide.**

**To support this life-saving work, we are developing relationships with key institutions and individuals. These can take many forms – information sharing, personal networking, fundraising events, employee mobilisation, professional secondments – as well as straightforward donations and sponsorships.**

**If you would like to develop a partnership with us, or simply to send a donation, please contact us for more information.**

## Contact

MERLIN,  
14 David Mews, Porter Street, London W1M 1HW.  
Telephone (44) 0171 487 2505,  
Fax (44) 0171 487 4042,  
e-mail [hq@merlin.org.uk](mailto:hq@merlin.org.uk)

## Supporters in 1997

We would like to thank everyone who has helped us in 1997. Without their assistance, our work would not have been possible. As well as the supporters listed below, we are extremely grateful to all our individual donors, who are too numerous to mention here.

A B Charitable Trust  
Anna & Colin Frizzell Charitable Trust  
Antoine de Castellane Marcos  
Aquarian Healing Trust  
Ashden Trust  
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John Ellerman Foundation  
Keymed Ltd  
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Lonely Planet  
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Lupin Laboratories Ltd  
McLaren  
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Medical Insurance Agency Charity  
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Verdon Smith Family Charitable Trust  
Visa International  
Willis Corroon Group plc  
Worshipful Company of Fruiterers

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Typesetting: Generator  
Printing: Newgate Press

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Howard Davies, Peter Fryer/Panos  
Pictures, Drew Gilmour, Sarah Hall,  
Tim Healing, Jonathan Lorie,  
Jeremy Nicholl, Jonathan Patrick,  
Jon Spaul, Tony Taylor, Alastair Troup.

"The white people at the health place are all called 'Merlin'. They gave me some jabs which are called vaccinations, and some tablets which took my tummy ache away. They weighed my sister and gave her special milk and porridge to make her strong."

Mukeshimana, seven-year-old refugee

